Burnett (Swam MIBRAR SURGEON GENERAL'S

GANGRENOUS ULCERATIONS.

AFFECTING THE FACE, INCLUDING THE LIDS OF BOTH EYES AND DESTROYING THE EYEBALLS—THE RESULT OF BITES BY A MAN.

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Carrie L., colored, 24 years of age, living in Fairfax County, Virginia, was admitted to the Emergency Hospital on April 22, 1898, with the following history: Eight days before, at 2 A.M., she had been attacked by her husband in a fit of madness. He stripped off her clothing and proceeded to bite her and claw her with his fingernails about the face and upper portion of her body, especially the chest, abdomen and back. She was found in an exhausted state by her neighbors in the morning and placed under the care of a local physician. Her condition, especially as to the injuries on the face, not improving, she was sent to the Emergency Hospital, where I saw her on the evening of April 22. I found both eyes entirely covered with a thick scab composed, as it seemed, partly of iodoform and partly of gangrenous There was a large phagedenic ulcer, with undermined edges, on the right cheek, three and onehalf by two inches, involving the entire thickness of the skin, a smaller one near the angle of the mouth. and two or three still smaller ones on the nose and upper lip. On removing the scabs covering the eyes. after softening them in hot boric acid solution, it was found that the edges of both lids of the right eye had been eaten away for their entire length, that the conjunctiva of both the eyeball and the lids had been destroyed, and the cornea had an ulceration occupying two-thirds of its surface and extending through its entire thickness, through which the iris had prolapsed. On the left side the destruction was even more extensive. The whole of the outer halves of

both lower and upper lids were involved in an ulceration which extended down on the cheek and temporal region, covering a space of three by four inches. The destruction was more profound than on the right side, going deep into the tissues of the orbit and reaching



Figure 1.

to the bone at the lower outer portion. The whole of the anterior half of the globe, including a portion of the sclera, was gone. The surface of the ulcers was covered with a most foul-smelling, greenish decomposing matter. The bites on the body were nearly all far advanced toward perfect healing, and these wounds seemed not to have taken on the phagedenic character of those of the face.

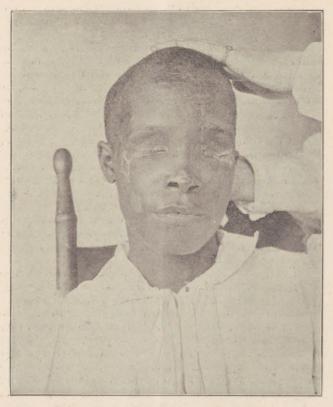


Figure 2.

All the dead matter was carefully dissected from the surface of the ulcers, until healthy tissue was reached. In the left orbit this necessitated the evisceration of the contents of the eyeball and the cutting away of some portions of the tendons of the external muscles of the eye, and a removal of a large part of the orbital tissue. Fig. 1 gives a very good idea of the appearance after the wounds had been cleansed. After this thorough cleansing, the surfaces were covered with iodoform gauze and a protective bandage applied. An examination was made of the gangrenous material and the discharge, but no unusual microorganisms were found, those present being the staphy-

lococcus pyogenes aureus and albus.

At the end of the first twenty-four hours she had a sudden rise of temperature to 106 F. This subsided in a few hours to practically the normal, at which it remained during the rest of her stay in the hospital. Under a nourishing diet and simple dressings of iodoform gauze, the healing went forward rapidly, and at the end of two weeks she was able to leave the hospital for her home. The condition was then as is represented in Fig. 2. There was total symblepharon on both sides, and the inside of the lids was everywhere adherent to the walls of the obits. The resulting cicatrices on the face are much smaller than was to be expected from such extensive ulceration.

Having heard legends of the poisonous character of the bite of the "blue-gum" negro, I made inquiries as to that quality in her husband, but it was most indig-

nantly denied by the wife.

In this case it is hardly possible to determine whether the extensive ulcerations on the face were due to some poisonous quality in the bites or scratches, or to the condition of the patient at the time, or to the want of treatment at the beginning. It is worthy of note that the bites on the abdomen and back, made at the same time, healed with promptness, and, supposedly, under the same treatment as that given to the wounds of the face, and that when the wounds of the face were put in an aseptic state they also healed well and rapidly. It was expected that some virulent micro-organism would be found in the discharge, possibly a form of streptococcus, but a careful search brought none to light. The general health of the patient at the time of her discharge was excellent.